

# To Resuscitate the Apparently Drowned---Methods Used by U.S. Life-Saving Service

**FIRST Movements Made to Save a Drowning Person, and Following Operations That Have Proven Successful—Notable Cases of Restoration of Apparently Drowned Persons by the Life-Saving Service—How to Take a Drowning Man From the Water—First-Aid Knowledge That Is Always Found Beneficial During the Swimming and Boating Season.**

**SUPPOSE** you stood on the shore of a river, lake or ocean, and saw a man apparently drowned person hauled out of the water. What would you do?

Moments are precious; a delay of five minutes, two minutes, even a minute, may mean the sacrifice of a life.

Would you hunt around for a barrel or run for a doctor? Or would you, with the self-confidence of knowledge, at once take charge of the body, and by intelligent manipulation free the unfortunate man, woman or child a fair chance to survive? Such a situation will doubtless confront many during the approaching vacation season.

It may be stated, parenthetically, that as a life-saver the barrel enjoys a reputation entirely out of keeping with its merits. Moreover, a barrel is rarely at hand when wanted for life-saving purposes. Rolling a body upon one might imperfectly accomplish the first step in the work of resuscitation, namely, the expulsion of water from the patient's stomach, but it will not re-establish respiration or circulation.

Until within comparatively recent years the belief generally obtained, among physicians and laymen alike, that a person fished out of the water after several minutes' immersion, with no pulse or heart action apparent, was beyond human help.

If any efforts were made at all to restore life in such cases they were usually unskillful and perfunctory, and intended merely to satisfy relatives or friends.

When the crews of the United States life-saving service, in the practice of a simple yet scientific method of resuscitation, began to forward to the general office of the service in Washington reports of remarkable restorations effected by them their accounts were regarded by the public with more or less skepticism. The reports came in with such frequency, however, and so much care was taken by headquarters to authenticate them in essential particulars, that the doubting Thomases were finally convinced of their reality.

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## Rule 1—Preliminary Treatment.

Begin the work of resuscitation immediately after the body is removed from the water. Do not take the patient from the scene of the accident unless he is in danger of freezing. Keep the face exposed to the air, and turned toward the wind. Wipe dry the mouth and nostrils. Open the clothing sufficiently to expose the chest and snap the chest smartly two or three times with the open hand. If the patient does not immediately revive proceed according to rule 2.

## Rule 2—To Expel Water From the Body.

Separate the jaws and keep them apart by a piece of wood inserted between the teeth. Next turn the patient upon his face, with a roll of clothing under his stomach, and for thirty seconds, or longer as water flows freely from the mouth, press heavily upon the back, as in figure 1.

## Rule 3—To Produce Breathing.

Clear the mouth and throat of mucus by means of a handkerchief wrapped around the forefinger. Turn the patient upon his back with the roll of clothing so placed under him as to raise the body at right angles to the stomach. Let an assistant, using a handkerchief, draw the tongue



FIGURE 2—TO INDUCE INSPIRATION.

out of the corner of the mouth and keep it projecting beyond the lips. This prevents the tongue dropping back and closing the windpipe. Now, at another assistant grasp the patient's arms just below the elbows and draw them steadily upward until they rest extended past the head, the hands nearly meeting, as in figure 2. This movement expands the chest and induces inspiration.

At the same time let another assistant take position astride the patient's hips with his knees resting upon his own knees, his hands over the body ready for action. The person at the head now moves the patient's arms down beside the body as in figure 3, the assistant who holds the tongue changing hands if necessary so as not to interfere with this movement. Just before the patient's arms reach the position last described, the man standing over the body will grasp it with both hands, letting the thumbs rest on either side of the pit of the stomach and allowing the fingers to

working the bellows movement, the limbs of the patient should be rubbed from the very beginning if a sufficient number of persons are at hand. The rubbing should be done always toward the body, with firm, grasping pressure, using the bare hands, dry flannels or handkerchiefs. If possible, the warmth of the body should be promoted by the application of hot flannels to the stomach and hot-water bags or heated bricks or stones to the limbs and soles of the feet.

## Rule 4—After Treatment.

As soon as breathing is established the patient should be stripped of all clothing, wrapped in blankets and put to bed comfortably warm, but with plenty of fresh air. Whisky, brandy or other stimulant and hot water should be administered.

Holmes of the Hereford Inlet, N. J., life-saving station went outside the inlet in a sailboat for an afternoon's outing, accompanied by three men and his small son.

Some hours after they left shore a heavy storm came up, and to escape it they beat back into the inlet. After anchoring their boat where it would be safe from the surf, they started to go ashore in a skiff. While they were still a considerable distance from the land the storm broke furiously upon them, and the darkness and rain shutting the boat out of sight from the shore, except when the agitated waters of the inlet were illuminated by blinding flashes of lightning.

The suddenly risen sea soon swamped the boat, precipitating all hands overboard. Holmes managed to get hold of his son and regain the shore in the locality, and drifted upon the bar near the marooned men. Holmes' companions secured the boat and carried the body of the child ashore, leaving the grief-stricken parent to be picked up by a boat that was seen leaving the inlet.

It is indisputably shown by the evidence in this case that the storm lasted fully half an hour. When it had passed and the light had become stronger, Holmes, still on the bar, recovered the body of his son, which he discovered near him under water in an eddy.

It so happened that during the prevalence of the storm a boat broke adrift from one of two vessels involved in collision somewhere in the locality, and drifted upon the bar near the marooned men. Holmes' companions secured the boat and carried the body of the child ashore, leaving the grief-stricken parent to be picked up by a boat that was seen leaving the inlet.

After rescuing Holmes, the occupant of the boat—proved to be the keeper of the life-saving station—proceeded to a pier, where the two men had landed the boy. Up to the time the keeper reached the pier nothing had been done in the way of an attempt to restore the boy, it being supposed by the men who brought him ashore, and by other persons who had come upon the scene, that he was dead. The keeper, nevertheless, took the body in hand, and after half an hour of persistent endeavor had the satisfaction of seeing his patient gasp. This encouraged, he kept at his task with renewed energy, and an hour later was able to restore the boy to his father, who recovered father, well on the road to recovery.

What was in some respects the most remarkable resuscitation ever performed by employees of the life-saving service took place July 4, 1906, near Wakefield, R. I., under the personal direction of Capt. Herbert M. Knowles, superintendent of the third life-saving district. Robert Mooney, a blacksmith of Wakefield, was the man resuscitated.

Mooney and a companion were thrown into the water by the capsizing of a



FIGURE 1—EXPPELLING WATER FROM THE BODY.

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fall into the depressions between the short ribs.

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